Nationally Notifiable Infectious Diseases and Conditions, United States: Annual Tables

TABLE 5. Annual reported cases of notifiable diseases and rates, by sex, United States, excluding U.S. Territories and Non-U.S. Residents, 2019

Data from some jurisdictions may be incomplete due to the coronavirus disease 2019 (COVID-19) pandemic. Please see Note #9 at the bottom of the table.

(Accessible Version: https://wonder.cdc.gov/nndss/static/2019/annual/2019-table5.html)

Disease	Fema	ale	Male		Sex not stated	Total
	No.	Rate	No.	Rate	No.	No.
Anthrax	_	_	1	0.00	_	•
Arboviral diseases						
Chikungunya virus disease	101	0.06	91	0.06	_	192
Eastern equine encephalitis virus disease						
Neuroinvasive	11	0.01	27	0.02	_	38
Non-neuroinvasive	_	_	_	_	_	_
Jamestown Canyon virus disease						
Neuroinvasive	7	0.00	18	0.01	_	25
Non-neuroinvasive	8	0.00	12	0.01	_	20
La Crosse virus disease						
Neuroinvasive	17	0.01	31	0.02	_	48
Non-neuroinvasive	5	0.00	2	0.00	_	-
Powassan virus disease						
Neuroinvasive	11	0.01	28	0.02	_	39
Non-neuroinvasive	1	0.00	3	0.00	_	4
St. Louis encephalitis virus disease						
Neuroinvasive	5	0.00	10	0.01	_	15
Non-neuroinvasive	_	_	2	0.00	_	2
West Nile virus disease						
Neuroinvasive	242	0.15	394	0.24	_	636
Non-neuroinvasive	158	0.09	180	0.11	_	338
Western equine encephalitis virus disease						
Neuroinvasive	_	_	_	_	_	
Non-neuroinvasive	_	_	_	_	_	
Babesiosis						
Total	819	0.60	1,575	1.19	26	2,420
Confirmed	674	0.49	1,373	1.03	21	2,066
Probable	145	0.49	204	0.15	5	354
Botulism	145	0.11	204	0.13	3	
Total	74	0.04	122	0.08		100
	9				_	196
Foodborne		0.01	11	0.01	_	20
Infant	62	3.36	86	4.44	_	148
Other (wound & unspecified)	3	0.00	25	0.02	_	28
Brucellosis	63	0.04	101	0.06	1	165
Campylobacteriosis	33,346	20.02	37,750	23.35	413	71,509
Candida auris, clinical *	54	0.04	86	0.06	35	175
Carbapenemase-producing carbapenem-resistant Enterobacteriaceae	694	0.45	714	0.48	75	1,483
Chancroid	2	0.00	6	0.00	_	8
Chlamydia trachomatis infection	1,160,470	696.64	644,337	398.58	3,896	1,808,703
Cholera	6	0.00	7	0.00	1	14
Coccidioidomycosis [†]	8,918	12.86	9,455	13.95	34	18,407
Cryptosporidiosis						
Total	7,087	4.25	6,772	4.19	116	13,975
Confirmed	5,063	3.04	5,045	3.12	77	10,185
Probable	2,024	1.22	1,727	1.07	39	3,790
Cyclosporiasis	2,708	1.79	1,983	1.35	12	4,703
Dengue virus infections §						
Dengue	719	0.43	694	0.43	1	1,414
Dengue-like illness	20	0.43	23	0.43		4:
Severe dengue	13	0.01	16	0.01	1	30
Diphtheria Diphtheria	1	0.00	10	0.00	'	2

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	Fema	Female		le	Sex not stated	Total
Disease	No.	Rate	No.	Rate	No.	No.
Ehrlichiosis and Anaplasmosis						
Anaplasma phagocytophilum infection	2,206	1.37	3,410	2.19	39	5,655
Ehrlichia chaffeensis infection	775	0.48	1,291	0.83	27	2,093
Ehrlichia ewingii infection	7	0.00	35	0.02	1	43
Undetermined ehrlichiosis/anaplasmosis	81	0.05	102	0.07	2	185
Giardiasis	5,507	4.22	9,293	7.34	60	14,860
Gonorrhea	253,359	152.09	361,586	223.67	1,447	616,392
Haemophilus influenzae, invasive disease						
All ages, all serotypes	3,297	1.98	2,787	1.72	59	6,143
Age <5 years						
Serotype b	8	0.08	10	0.10	_	18
Non-b serotype	85	0.89	127	1.27	1	213
Nontypeable	79	0.83	121	1.21	_	200
Unknown serotype	113	1.18	135	1.35	6	254
Hansen's disease	22	0.01	55	0.04	_	77
Hantavirus infection, non-hantavirus pulmonary syndrome ¶	2	0.00	1	0.00	_	3
Hantavirus pulmonary syndrome	9	0.01	9	0.01	_	18
Hemolytic uremic syndrome post-diarrheal	220	0.14	171	0.11	1	392
Hepatitis **						
A, acute	6,997	4.20	11,824	7.31	25	18,846
B, acute	1,296	0.78	2,245	1.40	3	3,544
B, perinatal infection	7	0.19	12	0.31	_	19
C, acute	2,131	1.34	3,336	2.15	12	5,479
Confirmed	1,653	1.04	2,471	1.60	12	4,136
Probable	478	0.30	865	0.56	12	1,343
C, perinatal infection	122	2.42	93	1.76	2	217
Human immunodeficiency virus diagnoses	6,068	3.64	25,655	15.87	_	31,723
Influenza-associated pediatric mortality	84	0.24	74	0.20	2	160
Invasive pneumococcal disease ^{††}	0.1	0.21	, ,	0.20		100
· ·	9,326	7.49	10 517	8.74	108	19,951
All ages	-		10,517 10,373			
Confirmed	9,210	7.40		8.62	106	19,689
Probable	116 465	0.09	144 644	0.12	2	262
Age <5 years Confirmed		0.35		0.50	6	1,115
	457	5.95	628	7.82	6	1,091
Probable	3.256	0.10	16	0.20	_	24
Legionellosis	3,256	1.95	5,574	3.45	60	8,890
Leptospirosis	13	0.01	81	0.06	_	94
Listeriosis ^{§§}						
Total	481	0.29	444	0.27	3	928
Confirmed	447	0.27	431	0.27	2	880
Probable	34	0.02	13	0.01	1	48
Lyme disease						
Total	14,578	8.79	19,612	12.19	755	34,945
Confirmed	9,590	5.78	13,164	8.18	699	23,453
Probable	4,988	3.01	6,448	4.01	56	11,492
Malaria	679	0.41	1,217	0.75	40	1,936
Measles ¶¶						
Total	538	0.32	737	0.46	_	1,275
Indigenous	501	0.30	691	0.43	_	1,192
Imported	37	0.02	46	0.03	_	83
Meningococcal disease						
All serogroups	184	0.11	187	0.12	_	371
Serogroups ACWY	65	0.04	74	0.05		139

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	Female		Male		Sex not stated	Total
Disease	No.	Rate	No.	Rate	No.	No.
Serogroup B	30	0.02	30	0.02	_	60
Other serogroups	16	0.01	8	0.00	_	24
Unknown serogroup	73	0.04	75	0.05	_	148
Mumps	1,299	0.78	2,458	1.52	23	3,780
Novel Influenza A virus infections	_	_	1	0.00	_	1
Pertussis	10,197	6.12	8,368	5.18	52	18,617
Plague	_	_	1	0.00	_	1
Poliomyelitis, paralytic	_	_	_	_	_	_
Poliovirus infection, nonparalytic	_	_	_	_	_	_
Psittacosis	3	0.00	1	0.00	_	4
Q fever						
Total	44	0.03	164	0.10	4	212
Acute	38	0.02	137	0.09	3	178
Chronic	6	0.00	27	0.02	1	34
Rabies						
Human	_	_	_	_	_	_
Rubella	3	0.00	3	0.00	_	6
Rubella, congenital syndrome	_	_	1	0.05	_	1
Salmonella Paratyphi infection ***	68	0.04	86	0.05	1	155
Salmonella Typhi infection ***	191	0.11	218	0.13	_	409
Salmonellosis (excluding <i>S.</i> Typhi infection and <i>S.</i> Paratyphi infection) §§§	30,396	18.25	27,355	16.92	620	58,371
	30,330	10.23	27,555	10.52	020	30,371
Severe acute respiratory syndrome-associated coronavirus disease	9,400	5.64	7,429	4.60	110	16,939
Shiga toxin-producing <i>Escherichia coli</i> (STEC)						
Shigellosis	7,611	4.57	10,798	6.68	165	18,574
Smallpox	_		_		_	
Spotted fever rickettsiosis	1.602	1.02	2 444	214	02	F 207
Total	1,683	1.02	3,441	2.14	83	5,207
Confirmed	40	0.02	85	0.05	3	128
Probable	1,643	0.99	3,356	2.09	80	5,079
Streptococcal toxic shock syndrome	187	0.17	227	0.22	2	416
Syphilis						
Total, all stages ^{¶¶¶}	28,172	16.91	99,240	61.39	2,401	129,813
Congenital	_			_	1,870	1,870
Primary and secondary	6,493	3.90	32,402	20.04	97	38,992
Tetanus	10	0.01	16	0.01	_	26
Toxic shock syndrome (other than Streptococcal)	28	0.02	16	0.01	_	44
Trichinellosis	2	0.00	5	0.00	_	7
Tuberculosis	3,555	2.13	5,361	3.32	_	8,916
Tularemia	96	0.06	175	0.11	3	274
Vancomycin-intermediate Staphylococcus aureus	33	0.03	42	0.03	1	76
Vancomycin-resistant <i>Staphylococcus aureus</i>	1	0.00	2	0.00	_	3
Varicella morbidity	3,456	2.54	4,377	3.31	464	8,297
Varicella mortality	U	U	U	U	U	U
Vibriosis						
Total	1,117	0.68	1,711	1.07	23	2,851
Confirmed	511	0.31	1,123	0.71	17	1,651
Probable	606	0.37	588	0.37	6	1,200
Viral hemorrhagic fevers						
Crimean-Congo hemorrhagic fever virus	_		_	_	_	_
Ebola virus	_	_	_	_		_
Guanarito virus	_	_	_		_	_
Junin virus	_	_	_	_		_
Lassa virus	_	_	_	_	_	_

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Fer		Female		le	Sex not stated	Total
Disease	No.	Rate	No.	Rate	No.	No.
Lujo virus	_	_	_	_	_	_
Machupo virus	_	_	_	_	_	_
Marburg virus	_	_	_	_	_	_
Sabia virus	_	_	_	_	_	_
Yellow fever	_	_	_	_	_	_
Zika virus						
Zika virus disease, congenital ****	_	_	_	_	_	_
Zika virus disease, non-congenital	20	0.01	8	0.00	_	28
Zika virus infection, congenital ****	_	_	_	_	_	_
Zika virus infection, non-congenital	168	0.10	9	0.01	_	177

- —: No reported cases The reporting jurisdiction did not submit any cases to CDC.
- U: Unavailable The data are unavailable.
- * Candida auris colonization/screening cases are not included in this table. These data are available on the Mycotic Diseases Branch's Tracking Candida auris page (https://www.cdc.gov/fungal/candida-auris/tracking-c-auris.html)
- † Reportable in <25 states.
- § Counts include confirmed and probable dengue cases.
- ¶ Includes data for old world hantavirus infections, such as Seoul virus and Puumala virus infections.
- ** Chronic hepatitis B and C data are not included in NNDSS tables but reported case counts are included in the annual Summary of Viral Hepatitis, published online by CDC's Division of Viral Hepatitis, available at https://www.cdc.gov/hepatitis/statistics/SurveillanceRpts.htm.
- ## Counts include drug resistant and susceptible cases of Invasive Pneumococcal Disease. This condition was previously named *Streptococcus pneumoniae* invasive disease and cases were reported to CDC using different event codes to specify whether the cases were drug resistant or in a defined age group, such as <5 years.
- §§ Before 2019, probable cases were not reported, and cases in neonates ≤60 days of age were counted as one case in a mother-infant pair. Beginning in 2019, confirmed and probable cases are being reported, and maternal and neonatal cases are being counted separately
- ¶¶ Measles is considered imported if the disease was acquired outside of the United States and is considered indigenous if the disease was acquired anywhere within the United States or it is not known where the disease was acquired.
- *** Beginning in January 2019, cases began to be reported as *Salmonella* Paratyphi infection. In 2018, cases were reported as paratyphoid fever. Prior to 2018, cases of paratyphoid fever were considered salmonellosis.
- ### Beginning in January 2019, cases began to be reported as *Salmonella* Typhi infection. In previous years, cases were reported as typhoid fever. \$\$\\$ Beginning in January 2019, cases began to be reported as salmonellosis (excluding *Salmonella* Typhi infection and *Salmonella* Paratyphi infection). In 2018, cases were reported as salmonellosis (excluding paratyphoid fever and typhoid fever). Prior to 2018, cases of paratyphoid fever were considered salmonellosis.
- ¶¶¶ Includes the following categories: primary; secondary; early non-primary non-secondary (includes cases previously reported as early latent); and unknown duration or late (includes cases previously reported as late latent syphilis and cases previously reported as late syphilis with clinical manifestations).
- **** Data reported to ArboNET using the national surveillance case definition for congenital Zika virus infection (CSTE Position Statement 16-ID-01).

Notes:

- 1. These are **annual** cases of selected infectious national notifiable diseases from the National Notifiable Diseases Surveillance System (NNDSS). NNDSS data reported by the 50 states, New York City, the District of Columbia, and the U.S. territories are collated and published. Cases are reported by state health departments to CDC weekly. Because source datasets may be updated as additional information is received, statistics in publications based on that source data may differ from what is presented in these tables.
- 2. The list of national notifiable infectious diseases and conditions for 2019 and their national surveillance case definitions are available by navigating to the Surveillance Case Definitions | CDC web page, selecting "2019" for the notifiable condition list year, checking "infectious" conditions, and clicking "Get Notifiable List by Year". This list incorporates the Council of State and Territorial Epidemiologists (CSTE) position statements approved in 2018 by CSTE for national surveillance that were implemented in January 2019. Candida auris, clinical became a new national notifiable condition, and revised case definitions were implemented for the following conditions: diphtheria, acute hepatitis A, listeriosis, yellow fever, Salmonella Paratyphi infection and Salmonella Typhi infection. Salmonella Paratyphi infection and Salmonella Typhi infection and S. Paratyphi infection and Typhi infection and S. Paratyphi infection infection infection and S. Paratyphi infection replaced Salmonellosis (excluding paratyphoid fever and typhoid fever) as a national notifiable condition. In addition, Carbapenemase Producing Carbapenem-Resistant Enterobacteriaceae (CP-CRE) represents a consolidation of CP-CRE species Klebsiella spp, CP-CRE E. coli, and CP-CRE Enterobacter spp. Publication criteria for the finalized 2019 data are available at https://wonder.cdc.gov/nndss/documents/2019_NNDSS_Publication_Criteria_01212021.pdf. See also Guide to Interpreting Provisional and Finalized NNDSS Data.
- 3. Population estimates for incidence rates are July 1st, 2019, estimates obtained from the National Center for Health Statistics (NCHS) postcensal estimates of the resident population of the United States for April 1, 2010, to July 1, 2019, by year, county, single year of age (range: 0 to 85 years), bridged-race (white, black or African American, American Indian or Alaska Native, Asian, or Pacific Islander), Hispanic ethnicity (not Hispanic or Latino, Hispanic or Latino), and sex (Vintage 2019), prepared under a collaborative arrangement with the U.S. Census Bureau. Population estimates for states released July 9, 2020, are available at https://www.cdc.gov/nchs/nvss/bridged_race/data_documentation.htm. Population estimates for territories are the 2019 mid-year estimates from the U.S. Census Bureau International Data Base, accessed on August 6, 2020, at https://www.census.gov/data-tools/demo/idb/#/country?YR_ANIM=2021. The choice of population denominators for incidence is based on the availability of population data at the time of publication preparation.
- 4. Annual tables for 2016 and later years are available on CDC WONDER.
- 5. Annual summary reports from 1993–2015 are available as published in the Morbidity and Mortality Weekly Report.
- 6. NNDSS annual tables since 1952 are available at CDC Stacks (once in CDC Stacks, select "Annual Reports" in the "Genre" box to the left).

7. For most conditions, national incidence rates are calculated as the number of reported cases for each infectious disease or condition divided by the U.S. resident population for the specified demographic population or the total U.S. resident population, multiplied by 100,000. When a national notifiable infectious condition is associated with a specific age restriction, the same restriction was applied to the population in the denominator of the incidence rate calculation. In addition, population data from reporting jurisdictions in which the disease or condition was not reportable or not available were excluded from the denominator of the incidence rate calculations.

Age restrictions in the numerator and denominator are applied for the following childhood conditions:

Zika virus disease, congenital (age restriction in numerator and denominator is <1 year)

Zika virus infection, congenital (age restriction in numerator and denominator is <1 year)

Haemophilus influenzae, invasive disease <5 years (age restriction in numerator and denominator is <5 years)

Invasive pneumococcal disease <5 years (age restriction in numerator and denominator is <5 years)

Influenza associated pediatric mortality (age restriction in numerator and denominator is <18 years)

Infant botulism (age restriction in numerator and denominator is <1 year)

Congenital rubella syndrome (age restriction in numerator and denominator is <1 year)

Perinatal Hepatitis B infection (age restriction in numerator is ≤24 months, denominator is <24 months)

Perinatal Hepatitis C infection (age restriction in numerator is ≤36 months, denominator is <36 months).

Data for congenital syphilis are aggregated by the infant's year of birth. The rate for congenital syphilis is based upon the number of reported cases per 100,000 live births, using natality data for 2019 (National Center for Health Statistics Natality 2019, as compiled from data provided by the Vital Statistics Cooperative Program). The mother's race and ethnicity are used for race- and ethnicity-specific rates of congenital syphilis cases. Congenital syphilis data are published in Syphilis Statistics in the sexually transmitted diseases (STD) surveillance report (https://www.cdc.gov/std/syphilis/stats.htm) and in the historical archives of the STD surveillance report (https://www.cdc.gov/std/syphilis/stats.htm) updates congenital syphilis cases and rates over time.

- 8. Surveillance data reported by other CDC programs might vary from data reported in these tables because of differences in 1) the date used to aggregate the data, 2) the timing of reports, 3) the source of the data, 4) surveillance case definitions, and 5) policies regarding case jurisdiction (i.e., which jurisdiction should submit the case notification to CDC).
- 9. The following 24 jurisdictions may have incomplete data, due to the coronavirus disease 2019 (COVID-19) pandemic: Alaska, California, Connecticut, Delaware, District of Columbia, Florida, Idaho, Indiana, Kansas, Massachusetts, Minnesota, Missouri, Montana, Nebraska, New Hampshire, New York (excluding New York City), New York City, North Dakota, Ohio, Oklahoma, South Carolina, Tennessee, Texas, and West Virginia. In addition, the following 2 U.S. Territories may have incomplete data due to the COVID-19 pandemic: American Samoa and the U.S. Virgin Islands.

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Acknowledgment:

• CDC acknowledges the local, state, and territorial health departments that collected the data from a range of case ascertainment sources (e.g., healthcare providers, hospitals, laboratories) and reported these data to CDC's National Notifiable Diseases Surveillance System.

National Notifiable Diseases Surveillance System

Provided by CDC WONDER